PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: **10/733.775**

CLAIMS AS FILED – PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	SMALL ENTITY FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY FEE
BASIC FEE (37 CFR 1.16(a))				$	OR		$
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =		X $___ =		OR	X $___ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =		X $___ =		OR	X $___ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ $___ =		OR	+ $___ =	
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL		OR	TOTAL	

CLAIMS AS AMENDED – PART II

2-22-06

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	SMALL ENTITY ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY ADDI-TIONAL FEE
	Total (37 CFR 1.16(c))	37	Minus	37	—	X $___ =		OR	X $___ =	
	Independent (37 CFR 1.16(b))	5	Minus	5	—	X $___ =		OR	X $___ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $___ =		OR	+ $___ =	
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

6/21/06

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	SMALL ENTITY ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY ADDI-TIONAL FEE
ANE	Total (37 CFR 1.16(c))	31	Minus	37	/	X $___ =		OR	X $___ =	
	Independent (37 CFR 1.16(b))	5	Minus	5	/	X $___ =		OR	X $___ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $___ =		OR	+ $___ =	
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	SMALL ENTITY ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY ADDI-TIONAL FEE
	Total (37 CFR 1.16(c))		Minus		=	X $___ =		OR	X $___ =	
	Independent (37 CFR 1.16(b))		Minus		=	X $___ =		OR	X $___ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $___ =		OR	+ $___ =	
						TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.